



## CITY OF ATLANTA

818 POLLARD BOULEVARD, SW • SUITE 301

ATLANTA, GEORGIA 30315

TEL: (404) 546-3070

FAX: (404) 658-7162

KASIM REED  
MAYOR

SUMMER FOOD SERVICE PROGRAM  
DEWITT W. MARTIN, III  
DIRECTOR

February 22, 2012

Dear Site Supervisor:

Welcome to another exciting year with the City of Atlanta's Summer Food Service Program (SFSP) for Children. This is our 37<sup>th</sup> year of service! Last year, because of you, we were able to provide thousands of meals to the youth of Metropolitan Atlanta.

**If your site has an interest in participating in the program this year, please follow these important steps:**

1. Complete the enclosed application packet. Make sure that you review all three (3) pages.
2. If your organization is "non-profit", please submit your 501(c)(3) "non-profit" document along with your completed application.
3. If you have a schedule for your field trips, and you plan to take our meals with you on these outings, please forward us a copy of the schedule. If you have not completed the schedule yet, you may submit to your monitor during your pre-op visit, at training, or during the first week of the program to your monitor.  
*Note: For all meals consumed off-site (field trips), you must notify the Monitoring Department three (3) days prior to the field trip.*

**You may submit your application one of three (3) ways:**

1. By U.S. Mail to our office at 818 Pollard Boulevard, SW, Suite 301, Atlanta, Georgia 30315.
2. By fax at (404) 658-7162.
3. You may e-mail the application packet to us at: [summerfoodserviceprogram@atlantaga.gov](mailto:summerfoodserviceprogram@atlantaga.gov).

Please note that incomplete documents may delay or decline your site's approval for participation in our program.

Your site will receive a training date via U.S. Mail during the week of April 16, 2011.  
Individuals responsible for distributing and maintaining all SFSP records must attend the training to complete the registration and approval process. We require that three (3) people from your site be trained in the procedures for our program. No exceptions! Remember to mark your calendar upon receiving the training date. Training is mandatory under the Federal and State Regulations.

I look forward to working with each of you this summer.

If there are questions, feel free to contact me at (404) 546-3070.

Sincerely,

DeWitt W. Martin, III  
Director

DWM, III/bh

**City of Atlanta**  
**Summer Food Service Program**  
**SITE INFORMATION SHEET**

1. Name of Site Supervisor: \_\_\_\_\_
2. Name and Address of Food Service Site: \_\_\_\_\_  
\_\_\_\_\_
3. County: \_\_\_\_\_
4. Telephone Number at Site: \_\_\_\_\_
5. Email Address: \_\_\_\_\_
6. Contact Number of Site Supervisor: \_\_\_\_\_
7. Mailing Address if different from Site: \_\_\_\_\_  
\_\_\_\_\_
8. Two (2) Public Schools Nearest to Site: 1. \_\_\_\_\_  
2. \_\_\_\_\_
9. Type of Site: Open \_\_\_\_\_ (Site serving entire community) Closed \_\_\_\_\_ (Site serving only children enrolled at site)  
Profit \_\_\_\_\_ Non-Profit \_\_\_\_\_
10. Did this Site Participate Last Year? Yes \_\_\_\_\_ No \_\_\_\_\_
11. Hours of Operation: \_\_\_\_\_ Is Site: Indoor \_\_\_\_\_ Outdoor \_\_\_\_\_
12. Is your organization a non-profit? Yes \_\_\_\_\_ (Please provide documentation with your application) No \_\_\_\_\_
13. Are there scheduled activities at this Site? Yes \_\_\_\_\_ No \_\_\_\_\_
14. Is there adequate refrigeration at the Site? Yes \_\_\_\_\_ No \_\_\_\_\_
15. Types of Meals Served: Breakfast \_\_\_\_\_ Lunch \_\_\_\_\_
16. Estimated number of children participating in your program? \_\_\_\_\_
17. Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_
18. Number of children that can eat at the site at one time: \_\_\_\_\_
19. Comments: \_\_\_\_\_  
\_\_\_\_\_

OFFICE USE ONLY

Eligibility By:

Maximum: Breakfast \_\_\_\_\_  
Lunch \_\_\_\_\_

ADP: Breakfast \_\_\_\_\_  
Lunch \_\_\_\_\_

2/22/12

**City of Atlanta**  
**Summer Food Service Program**  
**SITE SELECTION SHEET**

Site Name: \_\_\_\_\_

Site Address: \_\_\_\_\_

Site Telephone Number: \_\_\_\_\_

Person to contact for use of site: \_\_\_\_\_

Type of site (check appropriate type):

☐ Recreation

☐ School

☐ Church

☐ Playground

☐ Settlement House

☐ Park

☐ Residential Camp

☐ Playstreet

☐ Other

Estimated number of children the site could serve: \_\_\_\_\_

Estimated number of needy children in area: \_\_\_\_\_

Estimated number of personnel needed to adequately control the food service: \_\_\_\_\_

Is another site needed in this area: ☐ Yes ☐ No

Are the present facilities adequate for an organized meal service? \_\_\_\_\_

If the answer is no, comment: \_\_\_\_\_

For the estimated number of children does the site have:

Shelter for inclement weather

YES

NO

Adequate cooking facilities (if applicable)

Adequate storage for prepared or delivered food

Storage space for records at site

Adequate refrigeration

Access to a telephone

What types of organized activities are possible or planned at this site? \_\_\_\_\_

*Note: Governmental and private nonprofit sponsors can only provide food service at sites, which they directly operate.*

**City of Atlanta**  
**SUMMER FOOD SERVICE PROGRAM**  
**818 Pollard Boulevard, SW**  
**Suite 301**  
**Atlanta, Georgia 30315**

Please read this carefully. It will help us determine your site's eligibility for the 2012 Summer Food Service Program.

Your site is eligible to receive free meals based on two (2) methods:

1. **The PUBLIC SCHOOL** near your site had 50% or more of its children on free or reduced priced meals during the school year. Your site desires to feed the children in the community during the designated time for meal service. Your site will be designated as an **OPEN SITE**.
2. The **PUBLIC SCHOOL** near your site had 50% or more of its children on free or reduced priced meals during the school year. Your site desires to feed the children only enrolled in your program during the designated time for meal service. Your site will be designated as a **CLOSED ENROLLED SITE**.

**Choose One**

I \_\_\_\_\_, Site Supervisor of \_\_\_\_\_  
(Please Print) (Please Print)

would like to qualify as an **OPEN SITE** for the 2012 Summer Food Service Program. We will feed all needy children in our community who attend our meal service.

I \_\_\_\_\_, Site Supervisor of \_\_\_\_\_  
(Please Print) (Please Print)

would like to qualify as a **CLOSED ENROLLED SITE** for the 2012 Summer Food Service Program. We will only feed the children registered in our site who attend our meal service.

**Accountability Statement (Mandatory Signature Required)**

I will abide by all Summer Food Service Program (SFSP) guidelines. If I fail to abide by the prescribed guidelines, I will be accountable for all expenses incurred due to any financial negligence. This is inclusive of failure to distribute meals accordingly, failure to document all meals, failure to serve to children under 18, and failure to abide by all training guidelines, which cause financial repercussions to the City of Atlanta.

**Note:** The City of Atlanta will enforce repayment, at cost, if the State (DECAL) or Federal Monitoring Agency (USDA) disallows any meals due to any failure to meet SFSP guidelines.

I agree to the specified terms.

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Signature)